State Medevac Committee Meeting Richmond Marriott West Richmond, Virginia January 24, 2008 10:00 a.m.

Attendees	Members Absent:	OEMS Staff:	Others:
Terry Austin	Brian Solada	Paul Sharpe	Bruce Edwards, Chairman
Chris Perkins	Brett Dodd	Christy Saldana	Paul Davenport
Christopher Cannon	Peter Martin	Wanda Street	Scott Kunkel
Bob Possumato	Michael Ortega	Tim Perkins	
Brett Henyon	Stacey O'Quinn	Scott Winston	
Don Childs	Joseph Lopreto	Jodi Kuhn	
John Ratliff	William Aiken		
John Bianco	Chris Thomson		
Allen C. Wolfe, Jr.	David Trueman		
Chris Stevenson	Tim Pickering		
Erik Rohde	-		
Shawn Rivard			
Gregory Jones			
Mike Watkins			
Garrett Wymer			
Terri Camp-Rogers			
Jay Lovelady			

Topic/Subject	Discussion	Recommendations, Action/Follow-
		up; Responsible Person
Call to order:	Meeting was called to order at 10: 05 a.m. by Paul Sharpe who stood in for Bruce Edwards. Mr. Edwards could not be here today due to a family illness. Paul Davenport was asked to guest chair, but he had a last minute work related emergency and could not attend. Items five and six of the agenda will not be discussed due their absences.	
Approval of Minutes from October 25, 2007 meeting:	Motions were made to approve the last meeting minutes.	Minutes were approved as submitted.
Chair Report – Bruce	No report.	
Edwards:		
OEMS Report:	OEMS Statistician Copies of the "Trends 2006" report were distributed. The first half of the report is from the trauma registry and the second is from the pre hospital patient care reporting system (PPCR). Pages 21 and 22 are dedicated to Medevac data.	If anyone would like to see other data included in the 2007 edition, please contact Jodi at jodi.kuhn@vdh.virginia.gov .
	OEMS Trauma Coordinator	
	Russ Stamm is overseeing the LZ Directory. Please enter your agency information in the directory.	

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	It was requested that Russ send out the instruction sheet again.	up, responsible i erson
	The Medevac program within OEMS is planning to be moved as of July 1, 2008. It is planned to move the Medevac program to the OEMS EMS Systems Planner, Tim Perkins. The move was necessary to balance workload and responsibilities within OEMS due to newly legislated programs and growth of other programs.	
	As an informational item, OEMS is beginning a comprehensive review of the Trauma Triage process. This is the tenth year that a formal trauma triage process has been in place and little change or thorough evaluation has been performed during this time. The effort is starting with pulling data from the last 15 years out of the trauma registry to determine "what's working and what's not" and if we are making progress in the right direction. The finding will be made available upon completion and committees like Medevac may be asked to participate as the need arises. The final report will be made available publicly.	
	Chris Cannon posed the question of whether the trauma committee would be interested in having a Medevac representative on that committee. Paul invited Chris to come to the next meeting on March 6 at the Richmond Marriott to find out if they would like to have a Medevac representative. Committee meetings such as trauma, Medevac and similar are open public meetings.	
	 Some of the legislative items in the General Assembly that OEMS has been involved with are as follows: HB479 & SB344 - Stroke Triage Plan - Board of Health to develop and maintain a stroke triage plan and criteria as a component of EMS Plan. This is similar to the trauma triage process. OEMS will establish a stroke designation process. SB197 - Brain Injuries; eliminates requirement that hospitals report to the registry of the Dept. of Rehabilitative Services (DRS), but requires the Department of Health to share all information that is obtained through the Virginia Statewide Trauma Registry with DRS. SB228 adds certified emergency medical services personnel to the list of mandatory reporters of child abuse and neglect. HB191 & 192 involves clean up language pertaining to temporary suspension of permits and certificates pending hearing and "volunteer rescue squads" being replaced with the term "agency, entity, or provider licensed or certified by the Office of Emergency Medical Services." HB248 involves emergency medical services personnel; definitions. SB168 proposes a tax incentive for volunteer EMS personnel and firefighters. 	
	 SB503 proposes to establish the Office of EMS as the Department of EMS under the Secretary of Public Safety. This bill has been pulled as of January 16. The Department of Health has a new State Health Commissioner, Dr. Karen Remley from the Sentara health systems. We look forward to meeting her and working with her. She began on Tuesday, January 22. The regional council regulations went into effect on January 1st. The new regulations require a regional 	

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	council designation process. The designation process guidance documents are available on the OEMS Web site in the new "Regional Coordination" section. Within this section of the Web page there is also proposed regional council service area changes that are open for public comment. There will be a public hearing to discuss the proposed service areas on Monday, February 25 here at the Richmond Marriott from 7 p.m. to 9 p.m.	up, responsible retson
	The Training and Emergency Operations divisions of OEMS are scheduled to move on or about February 15 to 1005 Technology Park Drive in Glen Allen next to the Department of Fire Programs. A definite date has not been established.	
	Paul thanked everyone who stepped up to teach classes at symposium this year. Allen Wolfe and Brett Dodd will do a communications course. Paul Davenport will also do a course on scene operations. I'm sure someone will be joining him. If any other opportunities come about, I will let you know.	
	Scott Winston Scott shared a case that was going on in the Tidewater area involving patient destination protocols. If it is litigated it may affect all types of transport agreements as well as the Medevac community. The Tidewater EMS Council has a medical direction committee and they have developed an ambulance patient destination policy concerning free standing emergency centers or departments. The policy has certain criteria that need to be met before transporting a patient there, such as 24 hour services, staffed by a board certified emergency physician, on-site pharmacy, advanced imaging, monitoring of patient for up to 24 hours, etc. This policy is being challenged by Bon Secours as they have recently opened a free standing emergency center in Suffolk called Harbor View. OEMS has been asked to facilitate some type of resolution between these parties. We've spoken with the Attorney General's office and with Bon Secours. They are concerned that patients will be diverted from their facility. The main concerns of TEMS are that Harbor View lacks a pharmacy and it is unclear whether it is staffed by a board certified emergency physician. More to come on the developments of this case.	
Virginia "WeatherShare" Program Development:	No update as Paul Davenport was not able to attend the meeting.	
Where OEMS is located in State Government & What is the role of the EMS Advisory Board:	No update as Bruce Edwards was not able to attend the meeting.	
Best Practices:	Chris Cannon stated the last meeting was in November. Brett and Allen put together best practices recommendations for risk management. Paul and Susan had also produced a document for recommendations for the Air Medical Resource Management Program. This is also in the final stage for the group to review. We will be meeting today to discuss Deliverables 2.3.1 which is Medevac Use.	
Agency Reports/Program Announcements:	Chris Stevenson, LifeEVAC - We've had some leadership changes. I'll be stepping down from Program Director and will be the Chief Flight Nurse. The Program Director will need to be filled.	

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	Chris Cannon, Nightingale – At Sentara Leigh, there is construction occurring in the ED and the helipad will be moved. Norfolk General will soon be starting some construction and will have cranes on the property as well. Chris will send this information out as soon as he receives it.	
	Rob Possumato, VSP/MedFlight Commander – No report. John Ratliff, VSP/MedFlight II – No report.	
	Don Childs, VSP/MedFlight III – No report.	
	Terry Austin, VSP – Glad to be back.	
	Erik Rohde, PHI – All of our aircraft are now yellow and black, with the exception of Manassas. Our flight suits have transitioned as well and are now black. The Hopewell aircraft opened last week. It is operating out of John Randolph Medical Center. We ask that you please call the air craft communications center so that it can be moved upon your arrival. We are adding NVG for our Manassas and Fredericksburg bases. All seven bases in the region will have then have NVG capability.	
	Allen C. Wolfe, MedStar – We are in the final phases of our RFP. The finalists are Metro Aviation and Air Methods. We have a meeting tomorrow with Air Methods. The system will then decide who our next vendor will be by the second week in February.	
	John Bianco, Virginia Beach EMS – We are constructing a new hangar at this time and had to relocate our aircraft. The hangar is expected to be completed in March. We finished putting together the core program operations. We will start our training program the first of February and end July 4.	
	Chris Perkins, US Park Police – No report.	
	Stacey O'Quinn, Mountain States Health Alliance (MSHA)/Wings IV – We are fully operational and on the ground. We service Dickenson Community Hospital in Clintwood, VA and Tennessee.	
Old Business:	None.	
New Business:	Terry Austin wanted to know if there is any way to get a list of service areas for each agency. Paul will send the information that he has out to the systems.	
	Per Chris Cannon, Nightingale started sending faxes that automatically go out to neighboring districts and North Carolina. The dispatch center sends it out immediately upon turning down a flight due to adverse weather conditions. PHI also said that they will be doing the same thing either electronically or by fax.	
	Paul introduced the idea of having a vice chair for the Medevac meeting. This will be a topic of discussion for the next meeting.	
Adjournment	Meeting adjourned at approximately 11: 15 a.m.	The next meeting is April 24, 2008.